

PROPERTY TAX APPEAL FORM

File this appeal with the county tax appeal board on or before the First Monday in June or within 30 days of the time you receive your Notice of Assessment or revised assessment notice of real property subject to taxation or your Assessment List of personal property from the Department of Revenue. (For the purpose of a tax appeal, your notice of taxes due from your County Treasurer is not considered a notice of change or assessment.) You may also appeal a decision made by the Department of Revenue based upon your informal review. You must file the appeal of the outcome of the informal review conference within 30 days of receipt of the Department of Revenue decision.

FOR CTAB USE

DATE FILED.,
DOCKET #.'

Received by:

NAME OF TAXPAYER
AS SHOWN ON TAX ROLLS:

MAILING ADDRESS:

PHONE NO. (WORK): (HOME):

I hereby make application to the County Tax Appeal Board for adjustment in the appraised value of the following described property: (The following Section must be completed In full.)

LEGAL DESCRIPTION OF PROPERTY:

Lot(s) Block(s) Addition/Subdivision (Name)

City or town

Street address or name of property

No. of acres Section Township Range AssessorID#

	Appraised Value set by Department of Revenue	Appraised Value as Determined by Taxpayer	Appraised Value set by County Board Decision
LAND			
BUILDINGS			
PERSONAL PROPERTY			

REASONS FOR APPEAL:

WAS AN AB-26 FORM FILED WITH THE DOR?: YES NO IF YES, DATE:

PRINTED name of taxpayer

Signature of taxpayer Date:

I hereby authorize (PRINTED name of agent) to represent me in this matter.

Signature of taxpayer Date:

THIS PORTION FOR TAX APPEAL BOARD USE

The above application for reduction in appraised value is 0 approved disapproved C3 adjusted for the following reasons

Date County Tax Appeal Board, Chairperson

IF YOU ARE DISSATISFIED WITH THE LOCAL BOARD DECISION, COMPLETE THIS PORTION FOR APPEAL TO THE STATE TAX APPEAL BOARD

STAB DOCKET NO.:

1209 8TH Ave. 9PO Box 200138 * Helena MT 59620-0138
Telephone Number: (406) 444-2720 9FAX Number: (406) 444-3103 * Internet: www.state.mt.us/doa/stab

Section 15-2-301, MCA: "if the appearance provisions of the 15-15-103 have been complied with, a person or the department on behalf of the state or any municipal corporation aggrieved by the action of the county tax appeal board may appeal to the state board by filing with the state tax appeal board a notice of appeal within 30 calendar days after the receipt of the decision of the county board. The notice must specify the action complained of and the reasons assigned for the complaint."

I hereby appeal the action of the County Tax Appeal Board, received on (date) for the following reasons:

Signature: Date: